

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective December 8, 2004

10/702368

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |                          |              |
|----------------------------------|--------------------------|--------------|
| TOTAL CLAIMS                     |                          |              |
| FOR                              | NUMBER FILED             | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS          | minus 20 = *             |              |
| INDEPENDENT CLAIMS               | minus 3 = *              |              |
| MULTIPLE DEPENDENT CLAIM PRESENT | <input type="checkbox"/> |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    |             | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
|--|-------------|---|-------|---|--------------------------|
|  |             | Minus                                     | **    | =   | —                        |
|  | Total       | * 18                                      | Minus | ** 20                                       | = —                      |
|  | Independent | * 3                                       | Minus | *** 3                                       | = —                      |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |             |   |       |   | <input type="checkbox"/> |

6/14/5

(Column 1) (Column 2) (Column 3)

| AMENDMENT B                                    |             | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
|--|-------------|---|-------|---|--------------------------|
|  |             | Minus                                     | **    | =   | —                        |
|  | Total       | * 18                                      | Minus | ** 20                                       | = —                      |
|  | Independent | * 4                                       | Minus | *** 3                                       | = /                      |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |             |   |       |   | <input type="checkbox"/> |

SMALL ENTITY  
TYPE

|           |        |
|-----------|--------|
| RATE      | FEES   |
| BASIC FEE | 150.00 |
| X\$ 25=   |        |
| X100=     |        |
| +180=     |        |
| TOTAL     |        |

OTHER THAN  
OR SMALL ENTITY

|           |        |
|-----------|--------|
| RATE      | FEES   |
| BASIC FEE | 300.00 |
| X\$50=    |        |
| X200=     |        |
| +360=     |        |
| TOTAL     |        |

SMALL ENTITY

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 25=             |                        |
| X100=               |                        |
| +180=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

OTHER THAN  
OR SMALL ENTITY

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$50=              |                        |
| X200=               |                        |
| +360=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

(Column 1) (Column 2) (Column 3)

| AMENDMENT C                                    |             | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
|--|-------------|---|-------|---|--------------------------|
|  |             | Minus                                     | **    | =   | —                        |
|  | Total       | * 18                                      | Minus | ** 20                                       | = —                      |
|  | Independent | * 4                                       | Minus | *** 3                                       | = /                      |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |             |   |       |   | <input type="checkbox"/> |

|         |                        |
|---------|------------------------|
| RATE    | ADDI-<br>TIONAL<br>FEE |
| X\$ 25= |                        |
| X100=   |                        |
| +180=   |                        |

|        |                        |
|--------|------------------------|
| RATE   | ADDI-<br>TIONAL<br>FEE |
| X\$50= |                        |
| X200=  |                        |
| +360=  |                        |